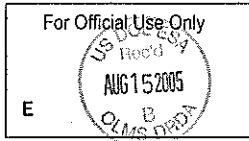


# FORM LM-30

## LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved  
Office of Management  
and Budget  
No. 1215-0188  
Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - <u>6383</u>	2. Fiscal Year Covered From: <u>1</u> / <u>1</u> / <u>2004</u> Through: <u>12</u> / <u>31</u> / <u>2004</u>
3. Name and address of person filing. Name <u>John</u> <u>F</u> <u>Hegarty</u> P.O. Box, Bldg., Room No., if any <u>Room # 500</u> Street <u>1101 Connecticut Avenue, NW</u> City <u>Washington</u> State <u>District of Columbia</u> ZIP Code + 4 <u>20036-4304</u>	4. Name, file number, and address of labor organization. Name <u>National Postal Mail Handlers Union</u> Labor Organization File Number <u>000-505</u> P.O. Box, Building and Room Number, if any <u>Room # 500</u> Street <u>1101 Connecticut Avenue, NW</u> City <u>Washington</u> State <u>District of Columbia</u> ZIP Code + 4 <u>20036-4304</u>
5. Position in labor organization. <u>National President</u>	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any). Name _____ Trade Name, if any: _____ P.O. Box, Bldg., Room No., if any _____ Street _____ City _____ State _____ ZIP Code + 4 _____	7.a. Nature of Interest, Transaction, or Income. _____ 7.b. Amount. _____

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)

Signed [Signature] On 08/02/05 202 833-9095  
Date Telephone Number

Name of Person Filing John Hegarty

File Number U-

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name First Health

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 3200 Highland Avenue

City Downers Grove

State Illinois

ZIP Code + 4 60515

9. Business deals with:



a. Labor Organization



b. Trust



c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

11.a. Nature of such dealing.

First Health administers the Union sponsored health plan

11.b. Approximate dollar value of such dealing.

Over two billion

12.a. Nature of interest held or income received.

Lunch meeting, January 7, 2004. Amount unknown, best estimate 25-30 Dollars

12.b. Amount.

best estimate \$ 25 - 30

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

14.a. Nature of payment.

13.b. Is the Business an Employer ☐or Consultant ☐

?

14.b. Amount of payment.

## Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

## 8. Name and address of Business (including trade name, if any).

Name Sheraton Boston Hotel  
Trade Name, if any:  
P.O. Box, Bldg., Room No., if any  
Street 39 Dalton Street  
City Boston  
State Massachusetts ZIP Code + 4 02199

## 9. Business deals with:

- ☒ a. Labor Organization  
☐ b. Trust  
☐ c. Employer

## 10. If 9.b. or 9.c. is checked give trust or employer's name.

Name  
Trade Name, if any:  
P.O. Box, Bldg., Room No., if any  
Street  
City  
State ZIP Code + 4

## 11.a. Nature of such dealing.

The Sheraton Boston was the site of the Unions convention in 2004

11.b. Approximate dollar value of such dealing. Approximately, \$500,000

## 12.a. Nature of interest held or income received.

Lunch meeting, February 2, 2004. Amount unknown.  
Best estimate 30-40 dollars.

12.b. Amount. best estimate \$ 30-40

Name of Person Filing John Hegarty

File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name First Health

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 3200 Highland Avenue

City Downers Grove

State Illinois

ZIP Code + 4 60515

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

9. Business deals with:

☒ a. Labor Organization

☐ b. Trust

☐ c. Employer

11.a. Nature of such dealing.

First Health administers the Union sponsored health plan.

11.b. Approximate dollar value of such dealing. over two billion

12.a. Nature of interest held or income received.

Attended two to three dinner meetings, (not sure how many), February 5-6-7, 2004. Amounts unknown, best estimate 20-40 dollars for each dinner.

12.b. Amount.

best estimate \$ 40-120

Name of Person Filing John Hegarty

File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name First Health

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 3200 Highland Avenue

City Downers Grove

State Illinois ZIP Code + 4 60515

9. Business deals with:

☒ a. Labor Organization

☐ b. Trust

☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

11.a. Nature of such dealing.

First Health administers the Union sponsored health plan.

11.b. Approximate dollar value of such dealing over two billion

12.a. Nature of interest held or income received.

Hotel room, (two nights), amount unknown, best estimate 250-300 dollars. Meals, amount unknown, best estimate 130-150 dollars. Recreational activity, amount unknown, best estimate 80-120 dollars. March 3-5, 2004.

12.b. Amount. best estimate \$460 - 570

## Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

## 8. Name and address of Business (including trade name, if any).

Name First Health

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 3200 Highland Avenue

City Downers Grove

State Illinois

ZIP Code + 4 60515

## 9. Business deals with:

☒ a. Labor Organization☐ b. Trust☐ c. Employer

## 10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

## 11.a. Nature of such dealing.

First Health administers the Union sponsored health plan.

11.b. Approximate dollar value of such dealing. over two billion

## 12.a. Nature of interest held or income received.

March 10-13. Attended 1-2 dinners, (not sure how many). Amount unknown. Best estimate 40-80 dollars total.

12.b. Amount. best estimate \$ 40-80

Name of Person Filing John Hegarty

File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name First Health  
Trade Name, if any:  
P.O. Box, Bldg., Room No., if any  
Street 3200 Highland Avenue  
City Downers Grove  
State Illinois ZIP Code + 4 60515

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name  
Trade Name, if any:  
P.O. Box, Bldg., Room No., if any  
Street  
City  
State ZIP Code + 4

9. Business deals with:

- ☒ a. Labor Organization  
☐ b. Trust  
☐ c. Employer

11.a. Nature of such dealing.

First Health administers the Union sponsored health plan.

11.b. Approximate dollar value of such dealing. over two billion

12.a. Nature of interest held or income received.

March 18-23 2004. Self and spouse. Attended 2-3 dinners, amount unknown, best estimate 80-120 dollars per person total. Attended 3 receptions with buffet dinners, amounts unknown. Best estimate 75-105 dollars per person total.

12.b. Amount. best estimate \$ 310 - 450

Name of Person Filing John Hegarty	File Number U-
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Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

<p>8. Name and address of Business (including trade name, if any).</p> <p>Name <u>First Health</u></p> <p>Trade Name, if any: <u></u></p> <p>P.O. Box, Bldg., Room No., if any <u></u></p> <p>Street <u>3200 Highland Avenue</u></p> <p>City <u>Downers Grove</u></p> <p>State <u>Illinois</u> ZIP Code + 4 <u>60515</u></p>	<p>9. Business deals with:</p> <p><input checked="" type="checkbox"/> a. Labor Organization</p> <p><input type="checkbox"/> b. Trust</p> <p><input type="checkbox"/> c. Employer</p>
<p>10. If 9.b. or 9.c. is checked give trust or employer's name.</p> <p>Name <u></u></p> <p>Trade Name, if any: <u></u></p> <p>P.O. Box, Bldg., Room No., if any <u></u></p> <p>Street <u></u></p> <p>City <u></u></p> <p>State <u></u> ZIP Code + 4 <u></u></p>	<p>11.a. Nature of such dealing.</p> <p><u>First Health administers the Union sponsored health plan.</u></p> <p>11.b. Approximate dollar value of such dealing. <u>over two billion</u></p> <p>12.a. Nature of interest held or income received.</p> <p><u>Dinner meeting, April 17, 2004. Amount unknown.</u> <u>Best estimate 35-45 dollars</u></p> <p>12.b. Amount. <u>best estimate \$ 35-45</u></p>



Name of Person Filing John Hegarty	File Number U-
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Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

<p>8. Name and address of Business (including trade name, if any).</p> <p>Name <u>First Health</u></p> <p>Trade Name, if any: <u></u></p> <p>P.O. Box, Bldg., Room No., if any <u></u></p> <p>Street <u>3200 Highland Avenue</u></p> <p>City <u>Downers Grove</u></p> <p>State <u>Illinois</u> ZIP Code + 4 <u>60515</u></p>	<p>9. Business deals with:</p> <p><input checked="" type="checkbox"/> a. Labor Organization</p> <p><input type="checkbox"/> b. Trust</p> <p><input type="checkbox"/> c. Employer</p>
<p>10. If 9.b. or 9.c. is checked give trust or employer's name.</p> <p>Name <u></u></p> <p>Trade Name, if any: <u></u></p> <p>P.O. Box, Bldg., Room No., if any <u></u></p> <p>Street <u></u></p> <p>City <u></u></p> <p>State <u></u> ZIP Code + 4 <u></u></p>	<p>11.a. Nature of such dealing.</p> <p><u>First Health administers the Union sponsored health plan.</u></p> <p>11.b. Approximate dollar value of such dealing. <u>over two billion</u></p> <p>12.a. Nature of interest held or income received.</p> <p><u>Dinner, two nights, April 26-27, 2004.</u> <u>Amounts unknown. Best estimate 40-50 dollars for each dinner.</u></p> <p>12.b. Amount. <u>best estimate</u> <u>\$ 80-100</u></p>

Name of Person Filing John Hegarty

File Number U-

## Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

## 8. Name and address of Business (including trade name, if any).

Name First Health

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 3200 Highland Avenue

City Downers Grove

State Illinois ZIP Code + 4 60515

## 9. Business deals with:

☒ a. Labor Organization☐ b. Trust☐ c. Employer

## 10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

## 11.a. Nature of such dealing.

First Health administers the Union sponsored health plan.

11.b. Approximate dollar value of such dealing. over two billion

## 12.a. Nature of interest held or income received.

Self & spouse attended health plan meeting, May 5-8, 2004. Hotel room, amount unknown, best estimate \$450. Meals, amount unknown, best estimate \$400-500 total. Air fare, amount unknown, best estimate \$500 total.

Recreational activity, amount unknown, best estimate \$160.

12.b. Amount. best estimate \$1510-1610

Name of Person Filing John Hegarty

File Number U-

## Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

## 8. Name and address of Business (including trade name, if any).

Name Mosaic

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 4801 Viewpoint Place

City Cheverly

State Maryland ZIP Code + 4 20781

## 10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

## 9. Business deals with:

☒ a. Labor Organization☐ b. Trust☐ c. Employer

## 11.a. Nature of such dealing.

Mosaic provides printing services to the Union.

## 11.b. Approximate dollar value of such dealing.

\$450,000

## 12.a. Nature of interest held or income received.

Lunch meeting, and golf, May 18, 2004. Lunch, amount unknown, best estimate \$20-30. Golf, amount unknown, best estimate \$40-50.

## 12.b. Amount.

best estimate \$ 60-80

Name of Person Filing John Hegarty

File Number U-

## Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

## 8. Name and address of Business (including trade name, if any).

Name First Health

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 3200 Highland Avenue

City Downers Grove

State Illinois

ZIP Code + 4 60515

## 9. Business deals with:

☒ a. Labor Organization☐ b. Trust☐ c. Employer

## 10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

## 11.a. Nature of such dealing.

First Health administers the Union sponsored health plan.

## 11.b. Approximate dollar value of such dealing.

over two billion

## 12.a. Nature of interest held or income received.

Lunch meeting, May 26, 2004. Amount unknown. Best estimate 25-35 dollars.

## 12.b. Amount.

best estimate \$ 25-35

Name of Person Filing John Hegarty

File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name Mosaic

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 4801 Viewpoint Place

City Cheverly

State Maryland ZIP Code + 4 20781

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

9. Business deals with:

☒ a. Labor Organization

☐ b. Trust

☐ c. Employer

11.a. Nature of such dealing.

Mosaic provides printing services to the Union.

11.b. Approximate dollar value of such dealing.

\$450,000

12.a. Nature of interest held or income received.

Lunch, June 9, 2004. Amount unknown. Best estimate 20-30 dollars.

12.b. Amount. best estimate \$ 20-30

## Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

## 8. Name and address of Business (including trade name, if any).

Name First Health

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 3200 Highland Avenue

City Downers Grove

State Illinois

ZIP Code + 4 60515

## 9. Business deals with:

☒ a. Labor Organization☐ b. Trust☐ c. Employer

## 10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

## 11.a. Nature of such dealing.

First Health administers the Union sponsored health plan.

11.b. Approximate dollar value of such dealing. over two billion

## 12.a. Nature of interest held or income received.

June 21-25, 2004. Self and spouse. 3-5 dinners, (not sure of exact number), amount unknown, best estimate 240-500 dollars total. Entertainment, amount unknown. Best estimate 280 dollars total.

12.b. Amount. best estimate \$ 520 - 780

Name of Person Filing John Hegarty

File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name First Health

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 3200 Highland Avenue

City Downers Grove

State Illinois ZIP Code + 4 60515

9. Business deals with:

☒ a. Labor Organization

☐ b. Trust

☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

11.a. Nature of such dealing.

First Health administers the Union sponsored health plan.

11.b. Approximate dollar value of such dealing. over two billion

12.a. Nature of interest held or income received.

Lunch meeting, August 12, 2004. Amount unknown.  
Best estimate 20-30 dollars.

12.b. Amount. best estimate \$ 20-30

Name of Person Filing John Hegarty

File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name First Health

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 3200 Highland Avenue

City Downers Grove

State Illinois

ZIP Code + 4 60515

9. Business deals with:

☒ a. Labor Organization

☐ b. Trust

☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

11.a. Nature of such dealing.

First Health administers the Union sponsored health plan.

11.b. Approximate dollar value of such dealing. over two billion

12.a. Nature of interest held or income received.

August 17-30. Self and spouse. 3-4 dinners, (not sure of exact number), amount unknown, best estimate \$240-400 total.  
5 receptions with buffet dinners, amount unknown, best estimate \$250-300 total.  
travel bag, amount unknown, best estimate \$40.  
two baseball game tickets. amount unknown best estimate \$60, total.

12.b. Amount. best estimate \$ 590-800



## Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

## 8. Name and address of Business (including trade name, if any).

Name First Health

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 3200 Highland Avenue

City Downers Grove

State Illinois ZIP Code + 4 60515

## 10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State  ZIP Code + 4

## 9. Business deals with:

- ☒ a. Labor Organization
- ☐ b. Trust
- ☐ c. Employer

## 11.a. Nature of such dealing.

First Health administers the Union sponsored health plan.

11.b. Approximate dollar value of such dealing. over two billion

## 12.a. Nature of interest held or income received.

Lunch meeting, September 22, 2004. Amount unknown. Best estimate 20-30 dollars.

12.b. Amount. best estimate \$ 20-30

Name of Person Filing John Hegarty

File Number U-

## Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

## 8. Name and address of Business (including trade name, if any).

Name Kelly Press/Convention Services Unlimited

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 1701 Cabin Branch Drive

City Cheverly

State Maryland ZIP Code + 4 20785

## 9. Business deals with:

☒ a. Labor Organization☐ b. Trust☐ c. Employer

## 10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

## 11.a. Nature of such dealing.

The firm provided sound/lighting/etc. for the Unions 2004 Convention.

## 11.b. Approximate dollar value of such dealing.

\$280,000

## 12.a. Nature of interest held or income received.

Lunch meeting, and golf, September 29, 2004. Amount unknown. Best estimate 60-80 dollars.

## 12.b. Amount.

best estimate \$ 60-80

Name of Person Filing John Hegarty

File Number U-

## Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

## 8. Name and address of Business (including trade name, if any).

Name First Health

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 3200 Highland Avenue

City Downers Grove

State Illinois

ZIP Code + 4 60515

## 9. Business deals with:

☒ a. Labor Organization☐ b. Trust☐ c. Employer

## 10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

## 11.a. Nature of such dealing.

First Health administers the Union sponsored health plan.

11.b. Approximate dollar value of such dealing. over two billion

## 12.a. Nature of interest held or income received.

October 6-9, 2004. Self and spouse. 4 receptions with buffet dinners, amount unknown, best estimate \$200-280 total.  
2 lunches, amount unknown, best estimate \$80-120 total.  
\$25 gift card  
recreational activities, amounts unknown, best estimate \$160, total.

12.b. Amount. best estimate \$ 465-585

Name of Person Filing John Hegarty

File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name First Health  
Trade Name, if any:   
P.O. Box, Bldg., Room No., if any   
Street 3200 Highland Avenue  
City Downers Grove  
State Illinois ZIP Code + 4 60515

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name   
Trade Name, if any:   
P.O. Box, Bldg., Room No., if any   
Street   
City   
State  ZIP Code + 4

9. Business deals with:

- ☒ a. Labor Organization  
☐ b. Trust  
☐ c. Employer

11.a. Nature of such dealing.

First Health administers the Union sponsored health plan.

11.b. Approximate dollar value of such dealing. over two billion

12.a. Nature of interest held or income received.

October 22, 2004. Dinner, self and spouse. Amount unknown. Best estimate 80-100 dollars total.

12.b. Amount. best estimate \$ 80-100

Name of Person Filing John Hegarty

File Number U-

Part B Continuation Page

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Name First Health

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 3200 Highland Avenue

City Downers Grove

State Illinois ZIP Code + 4 60515

9. Business deals with:

☒ a. Labor Organization

☐ b. Trust

☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

11.a. Nature of such dealing.

First Health administers the Union sponsored health plan.

11.b. Approximate dollar value of such dealing. over two billion

12.a. Nature of interest held or income received.

November 3, 2004. Dinner, self and spouse. Amount unknown. best estimate 80-100 dollars total.

12.b. Amount. best estimate \$ 80-100

Name of Person Filing John Hegarty

File Number U-

## Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

## 8. Name and address of Business (including trade name, if any).

Name Coventry Health Care

Trade Name, if any:

P.O. Box, Bldg., Room No., if any Suite 900

Street 6705 Rockledge Drive

City Bethesda

State Maryland

ZIP Code + 4 20817-1850

## 9. Business deals with:

☒ a. Labor Organization☐ b. Trust☐ c. Employer

## 10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

## 11.a. Nature of such dealing.

Coventry Health Care merged with First Health, in January of 2005. First Health provides administration of the Union sponsored health plan.

## 11.b. Approximate dollar value of such dealing.

over two billion  
as First Health

## 12.a. Nature of interest held or income received.

Lunch meeting, November 19, 2004. Amount unknown. best estimate 20-30 dollars.

## 12.b. Amount.

best estimate \$ 20-30

Name of Person Filing John Hegarty

File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name First Health

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 3200 Highland Avenue

City Downers Grove

State Illinois ZIP Code + 4 60515

9. Business deals with:

☒ a. Labor Organization

☐ b. Trust

☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

11.a. Nature of such dealing.

First Health administers the Union sponsored health plan.

11.b. Approximate dollar value of such dealing. over two billion

12.a. Nature of interest held or income received.

December 5-11, 2004. Self and spouse. Attended 3-4 dinners, (not sure of exact number), best estimate \$210-280 total. 3 reception/buffet dinners, amount unknown, best estimate \$150-210 total. 2 shows, amount unknown, best estimate \$280 total.

12.b. Amount. best estimate \$640,770

Name of Person Filing John Hegarty

File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name First Health

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 3200 Highland Avenue

City Downers Grove

State Illinois

ZIP Code + 4 60515

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

9. Business deals with:

☒ a. Labor Organization

☐ b. Trust

☐ c. Employer

11.a. Nature of such dealing.

First Health administers the Union sponsored health plan.

11.b. Approximate dollar value of such dealing. over two billion

12.a. Nature of interest held or income received.

Holiday gift, December 2004. Radio/CD player, amount unknown, best estimate \$275. Fruit/gift basket. Value unknown. Best estimate \$75.

12.b. Amount.

best estimate

\$350



Name of Person Filing John Hegarty

File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name Mosaic

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 4801 Viewpoint Place

City Cheverly

State Maryland ZIP Code + 4 20781

9. Business deals with:

☒ a. Labor Organization

☐ b. Trust

☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

11.a. Nature of such dealing.

Mosaic provides printing services to the Union.

11.b. Approximate dollar value of such dealing.

\$450,000

12.a. Nature of interest held or income received.

Holiday gift, December 2004. Golf club, (putter). Value unknown. Best estimate 75-100 dollars.

12.b. Amount.

best estimate \$ 75-100

Name of Person Filing John Hegarty

File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name Bredhoff & Kaiser

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 805 Fifteenth Street

City Washington

State District of Columbia ZIP Code + 4 20005-2207

9. Business deals with:

☒ a. Labor Organization

☐ b. Trust

☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

11.a. Nature of such dealing.

Bredhoff and Kaiser provides legal services to the Union.

11.b. Approximate dollar value of such dealing.

\$969,100

12.a. Nature of interest held or income received.

Dinner, self & spouse. Not sure of the date, possibly August 21, 2004. Amount unknown, best estimate 80-100 dollars total.

12.b. Amount.

best estimate \$ 80-100

Name of Person Filing John Hegarty

File Number U-

Part B Continuation Page

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8. Name and address of Business (including trade name, if any).

Name First Health

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 3200 Highland Avenue

City Downers Grove

State Illinois

ZIP Code + 4 60515

9. Business deals with:

☒ a. Labor Organization

☐ b. Trust

☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

11.a. Nature of such dealing.

First Health administers the Union sponsored health plan.

11.b. Approximate dollar value of such dealing. over two billion

12.a. Nature of interest held or income received.

Two dinners, April 15-16, 2004. Amounts unknown, best estimate 70-90 dollars total.

12.b. Amount.

best estimate \$ 70-90

Name of Person Filing John Hegarty

File Number U-

## Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

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Trade Name, if any:

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Street 3200 Highland Avenue

City Downers Grove

State Illinois

ZIP Code + 4 60515

## 9. Business deals with:

☒ a. Labor Organization☐ b. Trust☐ c. Employer

## 10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

## 11.a. Nature of such dealing.

First Health administers the Union sponsored health plan.

11.b. Approximate dollar value of such dealing. over two billion

## 12.a. Nature of interest held or income received.

Dinner meeting, not sure of date, possibly May 12, 2004. Amount unknown, best estimate 35-45 dollars.

12.b. Amount.

best estimate \$ 35-45